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**We are a voice, a listening ear,  
 a support for those affected by  
 eating disorders and their families.**

**SERVICES**

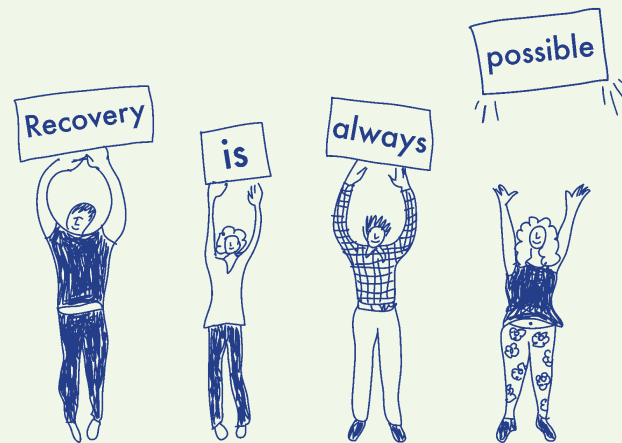
- Email Support Service
- 24 Hour Helpline Support
- Drop-in Service
- 1-1 Support
- Monthly Support Groups
- Early Intervention/Prevention Programmes for Schools and Youth Groups
- Workshops for Professionals

**A COPING MECHANISM**

Understanding that an eating disorder is a person's coping mechanism helps those around the person to realise how frightening and difficult it is for the person to let it go as they recover. It is therefore important that family and friends have realistic expectations of the pace of recovery.

For the person with an eating disorder, controlling food and the body is their way of relieving distress and achieving some degree of control over their life. Their world feels like an unsafe place, and, for many complex reasons, an eating disorder provides them with a sense of safety.

Once trapped within the eating disorder, people often feel they need to maintain it in order to survive. They don't know who they are or how they could cope without it.



**A FEW WORDS ABOUT RECOVERY**

It is precisely because the eating disorder serves a purpose that it becomes very difficult to stop its progress.

For the person affected, the eating disorder can seem like an effective coping mechanism and it can take hold very quickly. This is why it is difficult to stop its progress. The longer it is established, the more it takes on a life of its own and takes over the life of the person affected, so early intervention is really important.

Often, by the time they begin to understand what is happening, they are unable and too scared to try and stop. It is as if the eating disorder is now controlling them. For many, overwhelming feelings of helplessness, guilt, shame and self-loathing become an insurmountable block to seeking help.

**RECOVERY BEGINS WITH**

- A will to change.
- An acknowledgement that the eating disorder is a problem.
- Working to build up a strong sense of self and a new, healthy way of coping that does not need the eating disorder to feel safe.

Recovery requires working on underlying issues, building self-esteem, and learning to manage and express feelings, as well as addressing the physical and nutritional aspects of the disorder.

Recovery takes great courage and commitment. Much sensitivity, compassion, respect, understanding and patience will be needed by those around them (family, friends, G.P., and other members of the treatment team) if a person is to be successfully encouraged and supported on their journey towards recovery.

**About Eating Disorders**



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## WHAT ARE EATING DISORDERS?

The term 'eating disorder' refers to a complex, potentially life-threatening condition, characterised by severe disturbances in eating, emotional and psychological distress and physical symptoms.

Eating disorders can be seen as a way of coping with emotional distress, or as a symptom of underlying issues.

- Eating disorders are not primarily about food.
- Eating disorders can affect anyone.
- People can and do recover.

Eating disorders are characterised by a variety of disordered eating behaviours such as:

- Self-starvation - by fasting and/or food restriction.
- Purging - by self-induced vomiting, over-exercising, or laxative abuse.
- Bingeing - by consuming quantities of food beyond what the body needs to satisfy hunger.

An eating disorder can be very destructive, both physically and emotionally, and people can get trapped into the destructive cycle of the eating disorder without knowing how to cope with it.

An eating disorder is not just about food and weight, but also about a person's sense of who they are.

Treatment of an eating disorder will require attention to the physical and the psychological/emotional aspects of the person. Treatment must always include respect for and sensitivity for the overall well-being of the person.

The distress of a person experiencing an eating disorder, whether or not it is acknowledged, may have a considerable impact on family and friends.

## WHAT CAUSES AN EATING DISORDER?

There is no single cause that can explain why a person develops an eating disorder. It is usually a combination of factors (biological, psychological, familial and socio-cultural) that come together to create conditions in which an eating disorder is more likely to develop.

The disorder often develops gradually as a response to an upset in a person's life. This could be a traumatic event, a loss or major change in a person's life, bullying, an overload of stress, and/or critical comments about weight or shape. Sometimes, it is not obvious what the trigger may have been.

A person with low self-worth or without a strong sense of identity may be more vulnerable. People who develop eating disorders tend to be overly concerned with meeting the standards and expectations of others, and are super-sensitive to other people's feelings.

This explains why eating disorders occur so often during adolescence when identity is an issue, the opinion of peers is so important, and parental expectations are resisted. Eating disorders do not start out as a conscious choice and are not a wilful form of 'attention seeking'.

Understanding the emotional background of the eating disorder is crucial to developing an appropriate response and treatment approach.

## THE MAIN EATING DISORDERS:

Although the term 'eating disorder' is applied to a wide range of disordered eating behaviours, there are four main classifications: Anorexia Nervosa, Bulimia Nervosa, Binge Eating Disorder and Other Specified Feeding or Eating Disorder (OSFED).

Just because somebody doesn't fit in absolutely with one particular category doesn't mean they don't have an eating disorder. A large number of people with eating disorders don't fit strictly into one category but fluctuate between the three and may be diagnosed with OSFED.

## ANOREXIA NERVOSA

- A person will make determined efforts to attain and maintain a body weight lower than the normal body weight for their age, sex and height.
- They will be preoccupied with thoughts of food and the need to lose weight.
- They may exercise excessively and may engage in purging behaviours.

## BULIMIA NERVOSA

- A person will make determined efforts to purge themselves of any food eaten, sometimes following a binge, and often following 'normal' food intake.
- They will engage in high-risk behaviours that can include fasting, excessive exercising, self-induced vomiting, and/or the misuse of laxatives, diuretics or other medications.
- They may maintain a body weight within the normal range of their age, sex and height. As a result, bulimia is often less obvious than anorexia and can go unnoticed for longer.

## BINGE EATING DISORDER

- A person will engage in repeated episodes of bingeing without purging.
- They will likely gain considerable amounts of weight over time.
- They find themselves trapped in a cycle of dieting, bingeing, self-recrimination and self-loathing.

## PEOPLE EXPERIENCING AN EATING DISORDER MAY

- Have dieted.
- Have low self-esteem- though this may not be obvious, as people who develop eating disorders are often 'high achievers'.
- Show a marked over-concern with body shape, weight and size, and an obsession with food.
- See thinness as a magical solution to problems, while weight gain is feared.
- Have difficulty identifying and expressing their real needs.
- View their body as larger than it actually is (distorted body image).
- Have problems around control.
- Find it hard to talk about their feelings and to deal with conflict.
- Be depressed and may become isolated.
- Experience mood swings.
- Find change difficult and spontaneity challenging.